ARIZONA DEPARTMENT OF WEIGHTS AND MEASURES 4425 W Olive Avenue, Suite 134, Glendale AZ 85302-3844

PUBLIC WEIGHMASTER APPLICATION

LICENSE FEE = \$48

Phoenix Metro assistance: (623) 463-9946

Outside Phx Metro: 1-800-277-6675 FAX: 602-255-1950

PLEASE PRINT

PLICANT NAME:				BIR	TH DATE:			(Must be at least 18 years ol
SINESS NAME:					PHONE:			FAX:
SINESS ADDRESS:					CITY:			ZIP:
SICAL LOCATION:				<u> </u>				
LE OWNER INFORMATION (if	different from busines	s name above):	<u></u>		_			
ALE OWNER NAME:			BMF#:		ADDRESS:			
ALE TYPE:	VEHICLE SCALE	OTHER		DECK/PLATE	ORM SIZE:	CA	PACITY:	. lbs x
OTHER LOCATIONS WHERE	YOU WILL BE A PUBLI	C WEIGHMASTER:						
ADDRESS:			CITY:		ZIP:			
SCALE OWNER NAME:			BMF#:		ADDRESS:			
SCALE TYPE:	VEHICLE SCALE	OTHER		DECK/PLATE	ORM SIZE:	CA	PACITY:	. lbs x
ADDRESS:			CITY:		ZIP:			
SCALE OWNER NAME:			BMF#:		ADDRESS:	•		
_	_		_		-			
SCALE TYPE:	VEHICLE SCALE	OTHER		DECK/PLATE	ORM SIZE:	CA	PACITY:	. lbs x
LIST CURRENTLY-LICENSED NAME	DEPUTY PUBLIC WEIG	GHMASTERS (Depu	uty Public Weighma	ster applicatio		for individuals not	currently	licensed): SEAL REQUEST (check one)
								STAMP
								HAND HELD PRES
								DESK TOP PRESS
ARS 41-2093 requires a Public This is to certify that I have full k Department regulations relating APPLICANT MUST ATTACH A	knowledge of Title 41, Ch to Public Weighmaster a	apter 15 and Arizon nd will, upon licensu	a Administrative Codure, operate in accord	e Title 20, chap ance with said	ter 2 as it rela	tes to Public Weighr	naster lice	can perform Public Weighmaster censing and duties; and any other
			52 0021	· ·				Score:
Γ				Γ				License Issued:
APPLICANT SIGNATURE:			اما	ATF:				

Website: http://www.azdwm.gov